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PTO/SB/01 (12-97)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	A03195
	First Named Inventor	Thomas Blattner
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BINDING PROCESS FOR MANUFACTURING BROCHURES

the specification of which (Title of the Invention)

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
01126528.7	European Patent Office	11/13/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10059344.5	Germany	11/29/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10141811.6	Germany	08/27/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

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Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
Kevin L. Leffel	37,379	John L. Wood	32,183
James A. Cairns	32,557	Richard A. Romanchik	33,766

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:

☐ Customer Number
or Bar Code Label

OR ☒ Correspondence address below

Name	Kevin L. Leffel				
Address	Heidelberg Digital L.L.C.				
Address	2600 Manitou Road				
City	Rochester	State	NY	ZIP	14624
Country	USA	Telephone	585-512-8434	Fax	585-512-8065

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Thomas	Blättner

Inventor's Signature					Date		
Residence: City	71409 Schwaikheim	State		Country	Germany	Citizenship	German
Post Office Address	Lessingstrasse 19						
Post Office Address							
City		State		ZIP		Country	

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Michael				Freund			
Inventor's Signature				Date			
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Post Office Address							
City	73099 Adelberg	State		ZIP		Country	Germany
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Klaus				Herrmann			
Inventor's Signature				Date			
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Post Office Address							
City	737 Ostfildern	State		ZIP		Country	Germany
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Alexander				Hirsch			
Inventor's Signature				Date			
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Post Office Address							
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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Mario				Litsche			
Inventor's Signature				Date			
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Post Office Address							
City	70736 Fellbach	State		ZIP		Country	Germany
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Given Name (first and middle [if any])				Family Name or Surname			
Bernd				Reibl			
Inventor's Signature				Date			
Residence: City	73312 Geislingen	State		Country	Germany	Citizenship	German
Post Office Address	Tegelbergstrasse 36						
Post Office Address							
City	73312 Geislingen	State		ZIP		Country	Germany
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Albert				Rieger			
Inventor's Signature				Date			
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Post Office Address	Tegelbergstrasse 18						
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City	73312 Geislingen	State		ZIP		Country	Germany

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Herbert				Saum			
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Post Office Address							
City	73329 Kuchen	State		ZIP		Country	Germany
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Kurt				Stehle			
Inventor's Signature				Date			
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Post Office Address	Morikestrasse 9						
Post Office Address							
City	72639 Neuffen	State		ZIP		Country	Germany
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Hans-Peter				Würschum			
Inventor's Signature				Date			
Residence: City	73760 Ostfildern	State		Country	Germany	Citizenship	German
Post Office Address	Wurttembergstr. 7						
Post Office Address							
City	73760 Ostfildern	State		ZIP		Country	Germany

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	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Credit